

**The Grose Law Firm, LLC**  
404 Main Street, Greenwood, South Carolina 29646

E. Charles Grose, Jr.  
Phone: 864-538-4466 Fax: 864-538-4405  
E-mail: charles@groselawfirm.com  
Web: GroseLawFirm.com

August 17, 2020

**RECEIVED**

**Aug 17 2020**

**S.C. SUPREME COURT**

The Honorable Daniel E. Shearouse  
Clerk, Supreme Court of South Carolina  
P.O. Box 11330  
Columbia, SC 29211

Re: *State of South Carolina v. Luzenski Allen Cottrell*  
Case No. Case No. 2018-CP-26-05709  
60 Day Status Report

Dear Mr. Shearouse:

This letter is the sixty-day status report pursuant to *In re Stays of Execution in Capital Cases*, 321 S.C. 544, 471 S.E.2d 140 (1996).

By letter dated February 18, 2020, we reported, “Judge John issued a revised scheduling order” and, “Mr. Cottrell’s pre-hearing investigation is ongoing.” By letters dated April 14, 2020 and June 16, 2020, we reported, the COVID-19 pandemic has limited Mr. Cottrell’s prehearing investigation, our mitigation investigation requires travel to New York, North Carolina, Georgia, Alabama, and Texas, and the parties agreed to postpone depositions “as part of the COVID-19 safety measures.” We also reported Judge John scheduled a status conference for Thursday, August 27, 2020 at 10:00 a.m.<sup>1</sup>

At this point, we can provide the following assessment of the impact of COVID-19 on Mr. Cottrell’s pre-hearing investigation.

As a threshold matter, we understand this Court’s Order No. 2020-04-22-01, Section (c)(8) stayed the scheduling order until “[f]orty-five (45) days following the date on which the Governor lifts or rescinds the emergency orders relating to the coronavirus emergency.” This provision contemplates new scheduling orders “must consider the impact the emergency has on the ability of the parties and counsel to proceed.” On August 10, 2020, the Governor issued Executive Order No. 2020-53 reaffirming “that a State of Emergency exists in South Carolina” because of the coronavirus.

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<sup>1</sup> Both parties have requested a WebEx conference, but it appears the PCR court will require in person attendance except for Mr. Cottrell who will appear by closed circuit television.

Because of the need for out-of-state travel, forty-five days following the date on which the Governor lifts or rescinds the emergency orders relating to the coronavirus emergency will not be sufficient time to complete the mitigation investigation. In assessing the need for additional time, we have considered the following circumstances.

First, New York Executive Order No. 205 (Exhibit A)<sup>2</sup> provides:

All travelers entering New York from a state with a positive test rate higher than 10 per 100,000 residents, or higher than a 10% test positivity rate, over a seven day rolling average, will be required to quarantine for a period of 14 days consistent with Department of Health regulations for quarantine.

A New York travel advisory lists South Carolina, Alabama, Georgia, and Texas as states meeting the criteria for the mandatory quarantine. Exhibit B.<sup>3</sup>

Second, on August 9, 2020, the White House Coronavirus Task Force issued a State Report for Georgia, which concluded “Georgia is in the red zone for cases” and “[c]urrent mitigation efforts are not having a sufficient impact.” The Task Force “strongly recommend[ed] a statewide mask mandate.” Exhibit C.<sup>4</sup>

Third, on July 14, 2020, the White House Coronavirus Task Force issued a State Report for Alabama concluding “Alabama is in the red zone for cases” and “[d]isease trends are moving in the wrong direction with cases continuing to increase and record numbers of new cases occurring in urban, suburban, and rural areas.” Exhibit D.<sup>5</sup> On August 16, 2020, Alabama reported, “The number of new cases to the cumulative count brings the 7-day average down to 906, the lowest it has been since late June.” Exhibit E.<sup>6</sup>

Fourth, On July 7, 2020, the White House Coronavirus Task Force issued a State

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<sup>2</sup> Found at <https://www.governor.ny.gov/news/no-205-quarantine-restrictions-travelers-arriving-new-york> (last viewed Aug. 17, 2020).

<sup>3</sup> Found at <https://coronavirus.health.ny.gov/covid-19-travel-advisory> (last viewed Aug. 17, 2020).

<sup>4</sup> Found at <https://www.ajc.com/news/white-house-warns-of-widespread-and-expanding-viral-spread-in-georgia/5DEVU3BSCZAIHCSI3A3KTTGGIY/> (last viewed Aug. 17, 2020).

<sup>5</sup> Found at <https://publicintegrity.org/health/coronavirus-and-inequality/exclusive-white-house-document-shows-18-states-in-coronavirus-red-zone-covid-19/> (last viewed Aug. 17, 2020).

<sup>6</sup> Found at <https://www.al.com/news/2020/08/alabama-adds-722-new-coronavirus-cases-as-7-day-average-drops-to-lowest-since-late-june.html> (last viewed Aug. 17, 2020).

Report for Texas, which concluded “Texas is in the red zone for cases” and noted “Texas has 206 new cases per 100,000 population in the past week compared to a national average of 119 per 100,000.” Exhibit F.<sup>7</sup>

Fifth, we have retained a neuropsychologist to conduct an evaluation of Mr. Cottrell, which will include a clinical evaluation and reviewing social history records and other mitigation materials. We have provided this expert available documents and mitigation materials to review; however, those mitigation materials are not complete because our mitigation investigation is not complete because of COVID-19. Additionally, this expert informed us she cannot travel to South Carolina for the clinical evaluation until conditions are safe.

In summary, despite the coronavirus pandemic, we have made progress on Mr. Cottrell’s mitigation investigation. Although public health conditions in New York improved significantly over the summer, public health conditions in South Carolina deteriorated so much that New York currently requires a fourteen-day quarantine for people traveling to New York for South Carolina. Georgia, Alabama, and Texas remaining in the red zone for new cases of the virus.

We, therefore, recommend the PCR court evaluate the COVID-19 status every sixty days. Once public health conditions are safe, the PCR court will be in a position to “issue a new or amended scheduling order,” that fully “consider[s] the impact the emergency has on the ability of the parties and counsel to proceed,” with “input from the parties and counsel,” as contemplated by this Court’s Order No. 2020-04-22-01, Section (c)(8).

Thank you for your attention to this matter. Please let me know if you have any questions or require additional information.

With kindest regards, I am

Yours very truly,

s/E. Charles Grose, Jr.

E. Charles Grose, Jr.

cc: The Honorable Steven H. John  
Brie Russell, Esquire  
Hannah Freedman, Esquire  
Melody J. Brown, Esquire  
Joe Maye, Esquire

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<sup>7</sup> Found at <https://publicintegrity.org/health/coronavirus-and-inequality/exclusive-white-house-document-shows-18-states-in-coronavirus-red-zone-covid-19/> (last viewed Aug. 17, 2020).

# Exhibit A



# State of New York

## Executive Chamber

No. 205

### EXECUTIVE ORDER

#### **QUARANTINE RESTRICTIONS ON TRAVELERS ARRIVING IN NEW YORK**

**WHEREAS**, the State of New York has successfully slowed the transmission of COVID-19;

**WHEREAS**, the State of New York has gone from having the highest infection rate to one of the lowest in the country and is one of only a few states reported to be on track to contain COVID-19;

**WHEREAS**, the Governor has undertaken a cautious, incremental and evidence-based approach to reopening the State of New York;

**WHEREAS**, other states that may have taken a less cautious approach are experiencing an increased prevalence of COVID-19;

**WHEREAS**, New York must work in conjunction with its neighboring states of New Jersey and Connecticut, in light of the significant risk posed to the health and welfare of all residents by the further spread of COVID-19 to the tristate area, to protect the progress made;

**NOW, THEREFORE**, I, Andrew M. Cuomo, Governor of the State of New York, by virtue of the authority vested in me by the Constitution and the Laws of the State of New York, in particular Article IV, section one, I do hereby order and direct as follows:

The commissioner of the Department of Health to issue a travel advisory to be communicated widely at all major points of entry into New York, including on highway message boards and in all New York airports, that:

All travelers entering New York from a state with a positive test rate higher than 10 per 100,000 residents, or higher than a 10% test positivity rate, over a seven day rolling average, will be required to quarantine for a period of 14 days consistent with Department of Health regulations for quarantine.

The Commissioner may issue additional protocols for essential workers, or for other extraordinary circumstances, when a quarantine is not possible, provided such measures continue to safeguard the public health.

The criteria and the protocols will be coordinated with New Jersey and Connecticut Commissioners of Health, in order to ensure that the tristate area is protected from community transmission of COVID-19, while permitting free travel between and among the states.

The Commissioner of Health in New York shall make public the impacted jurisdictions on its website and such travel advisory will be effective at 12:01 a.m. on June 25, 2020, until rescinded by the Commissioner.

Any violation of a quarantine or isolation order issued to an individual pursuant to the Commissioner of the Department of Health's travel advisory by a local department of health or state

department of health may be enforced pursuant to article 21 of the public health law, and non-compliance may additionally be deemed a violation pursuant to section 12 of the public health law subject to a civil penalty of up to \$10,000.



G I V E N under my hand and the Privy Seal of the  
State in the City of Albany this  
twenty-fourth day of June in the year  
two thousand twenty.

BY THE GOVERNOR

  
Secretary to the Governor

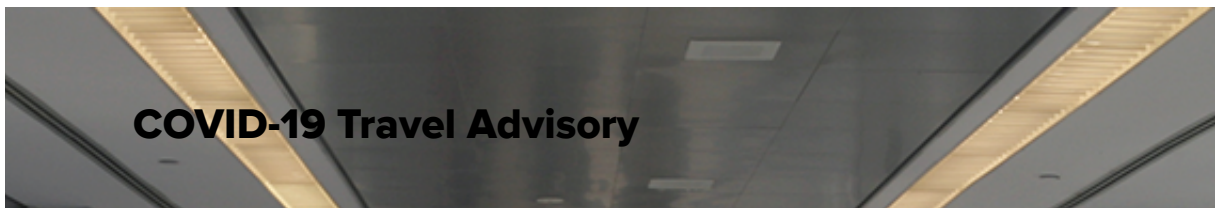


# **Exhibit B**



## Novel Coronavirus (/)

Call the Hotline: [1-888-364-3065 \(tel:18883643065\)](tel:18883643065) or [Ask a Question \(/form/ask-us-a-question\)](/form/ask-us-a-question). | [Travel Advisory in Place for Individuals Traveling From States with Significant Community Spread of COVID-19. \(https://coronavirus.health.ny.gov/covid-19-travel-advisory\)](https://coronavirus.health.ny.gov/covid-19-travel-advisory)



## Overview

In response to increased rates of COVID-19 transmission in certain states within the United States, and to protect New York's successful containment of COVID-19, the State has joined with New Jersey and Connecticut in jointly issuing a travel advisory for anyone returning from travel to states that have a significant degree of community-wide spread of COVID-19.

[RE/](#)

(HTTPS://CORONAVIRUS.HEALTH.NY.GOV//SYSTEM/FILE)

[TOP](#) [^](#) [\(#top\)](#)

# COVID-19 Travel Advisory

## SECTIONS

**NEXT SECTION**

Continue [↓](#)

**Overview**  
(#overview)

## Traveler Health Form

**Traveler Health Form**  
(#traveler-health-form)

**Restricted States**  
(#restricted-states)

# Traveler Health Form

**Guidance for Travel**  
(#guidance-for-travel)

A travel enforcement operation will commence at airports across the state to help ensure travelers are following the state's quarantine restrictions. As part of the enforcement operation, enforcement teams will be stationed at airports statewide to meet arriving aircrafts at gates and greet disembarking passengers to request proof

**Protect Yourself and Others**

**(#protect-yourself-and-others)**

of completion of the State Department of Health traveler form, which is being distributed to passengers by airlines prior to, and upon boarding or disembarking flights to New York State.

**Precautionary Quarantine Requirements**

**(#precautionary-quarantine-requirements)**

All out-of-state travelers from designated states must complete the form upon entering New York. Travelers who leave the airport without completing the form will be subject to a \$2,000 fine and may be brought to a hearing and ordered to complete mandatory quarantine.

**Exemptions**

**for**

**Essential Workers**

**(#exemptions-**

**for-**

**essential-**

**workers)**

Travelers coming to New York from designated states through other means of transport, including trains and cars, must fill out the form online.

**COMPLETE THE ONLINE TRAVELER HEALTH FORM**

**(HTTPS://FORMS.NY.GOV/S3/WELCOME-TO-NEW-YORK-STATE-TRAVELER-HEALTH-FORM)**

**Ineligible**

**for Paid**

**Sick Leave**

**Scenario**

**(#ineligible-**

**for-paid-**

**sick-leave-**

**scenario)**

**NEXT SECTION**

Continue ↓

## Restricted States

**Frequently  
Asked  
Questions  
(#frequently-  
asked-  
questions)**

# Restricted States

Based upon Governor Cuomo's Executive Order 205, issued June 25, 2020, the following states and territories meet the criteria for required quarantine:

- Alabama
- Arizona
- Arkansas
- California
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maryland
- Minnesota

- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- North Carolina
- North Dakota
- Oklahoma
- Puerto Rico
- South Carolina
- South Dakota
- Tennessee
- Texas
- Utah
- Virginia
- Virgin Islands
- Wisconsin

This is based upon a seven day rolling average, of positive tests in excess of 10%, or number of positive cases exceeding 10 per 100,000 residents.

**NEXT SECTION**

Continue ↓

## Guidance for Travel

# Guidance for Travel

The travel advisory is effective at 12:01 am on Thursday, June 25, 2020. If you have traveled from within one of the designated states with significant community spread, you must quarantine when you enter New York for 14 days from the last travel within such designated state, provided on the date you enter into New York State that such state met the criteria for requiring such quarantine.

The requirements of the travel advisory do not apply to any individual passing through designated states for a limited duration (i.e., less than 24 hours) through the course of travel.

Examples of such brief passage include but are not limited to: stopping at rest stops for vehicles, buses, and/or trains; or lay-overs for air travel, bus travel, or train travel.

The travel advisory requires all New Yorkers, as well as those visiting from out of state, to take personal responsibility for complying with the advisory in the best interest of public health and safety.

For questions about the travel advisory please refer to the guidance linked [here](#)

(<https://coronavirus.health.ny.gov/system/files/documents/>

.

For general inquires contact the call the Hotline: [1-888-364-3065](tel:1-888-364-3065) (tel:18883643065) or [Ask a Question](#)

(<https://coronavirus.health.ny.gov/form/ask-us-a-question>).

To file a report of an individual failing to adhere to the quarantine pursuant to the travel advisory [click here](#)


(<https://protect2.fireeye.com/v1/url?k=47b7c419-1b36f67a-47b53d2c-000babd9069e->

[f26123a2d967000f&q=1&e=0f158a10-fd57-469f-ae6f-](https://protect2.fireeye.com/v1/url?k=47b7c419-1b36f67a-47b53d2c-000babd9069e-f26123a2d967000f&q=1&e=0f158a10-fd57-469f-ae6f-)


[f1b1910ccf47&u=https%3A%2F%2Fmylicense.custhelp.com](https://protect2.fireeye.com/v1/url?k=47b7c419-1b36f67a-47b53d2c-000babd9069e-f26123a2d967000f&q=1&e=0f158a10-fd57-469f-ae6f-f1b1910ccf47&u=https%3A%2F%2Fmylicense.custhelp.com)  
or call 1-833-789-0470.

Individuals may also contact their local department of health.

# Guidance Documents

 [Guidance for Professional Sports Teams](#)  
([/system/files/documents/2020/07/professional-sports-travel-advisory-guidance.pdf](#))

([/system/files/documents/2020/07/professional-sports-travel-advisory-guidance.pdf](#))

 [Guidance for Individuals Traveling for Medical Treatment](#)  
([/system/files/documents/2020/07/medical-and-travel-advisory-20-final.pdf](#))

([/system/files/documents/2020/07/medical-and-travel-advisory-20-final.pdf](#))

**NEXT SECTION**      Continue ↓

## Protect Yourself

## and Others

# Protect Yourself and Others

### **Help Stop the Spread: Protect Yourself and Others**

- Avoid public places including while traveling, if possible.
- Wear a mask if
  - You are within six feet of distance from other individuals
  - In a situation or setting where they are unable to maintain six feet of distance from other individuals
  - In a public or private transportation carrier or for-hire vehicle.
- Wash your hands often with soap and water for at least 20 seconds,

especially before you eat.

- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Cover your cough and sneezes with a tissue and discard it in a closed container.
- Clean frequently touched surfaces and objects.

**NEXT SECTION**

Continue ↓

## Precautionary Quarantine Requirements

# Precautionary Quarantine Requirements

**Shelter Requirements**  
**Precautionary Quarantine**

- The individual must not be in public or otherwise leave the quarters that they have identified as suitable.
- Separate quarters with separate bathroom facilities for each individual or family group. Access to a sink with soap and water, and paper towels is needed.
- The contact must have a way to self-quarantine from household members as soon as fever or other symptoms develop, in a separate room. There must be a door that separates it from the rest of the living area and has its own bathroom. Given that an exposed individual might become ill while sleeping, the exposed individual must sleep in a separate bedroom from household members.
- Cleaning supplies, e.g. household cleaning wipes, must be provided in any shared bathroom.
- If an individual sharing a bathroom becomes symptomatic, all others sharing the bathroom will be considered exposed persons until the

symptomatic individual is appropriately evaluated and cleared.

- Food must be delivered to the individual's quarters.
- Quarters must have a supply of face masks for individuals to put on if they become symptomatic.
- Garbage must be bagged and left outside by the door of each of the quarters for routine pick up. Special handling is not required.
- Individuals should self-monitor for fever and other symptoms of COVID-19 daily throughout the duration of the quarantine period.

**NEXT SECTION**

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## Exemptions for Essential Workers

# Exemptions for Essential Workers

Exceptions to the travel advisory are permitted for essential workers and are limited based on the duration of time in designated states, as well as the intended duration of time in New York. The Commissioner of Health may additionally grant an exemption to the travel advisory based upon extraordinary circumstances, which do not warrant quarantine, but may be subject to the terms and conditions applied to essential workers or terms and conditions otherwise imposed by the Commissioner in the interest of public health.

## **Short Term – for essential workers traveling to New York State for a period of less than 12 hours.**

- This includes instances such as an essential worker passing through New York, delivering goods, awaiting flight layovers, and other short

duration activities.

- Essential workers should stay in their vehicle and/or limit personal exposure by avoiding public spaces as much as possible.
- Essential workers should monitor temperature and signs of symptoms, wear a face covering when in public, maintain social distance, and clean and disinfect workspaces.
- Essential workers are required, to the extent possible, to avoid extended periods in public, contact with strangers, and large congregate settings.

**Medium Term – for essential workers traveling to New York State for a period of less than 36 hours, requiring them to stay overnight.**

- This includes instances such as an essential worker delivering multiple goods in New York, awaiting longer flight layover, and other medium duration activities.
- Essential workers should monitor temperature and signs of symptoms, wear a face covering when in public, maintain social

distance, and clean and disinfect workspaces.

- Essential workers are required, to the extent possible, to avoid extended periods in public, contact with strangers, and large congregate settings.

**Long Term – for essential workers traveling to New York State for a period of greater than 36 hours, requiring them to stay several days.**

- This includes instances such as an essential worker working on longer projects, fulfilling extended employment obligations, and other longer duration activities.
- Essential workers should seek diagnostic testing for COVID-19 as soon as possible upon arrival (within 24 hours) to ensure they are not positive.
- Essential workers should monitor temperature and signs of symptoms, wear a face covering when in public, maintain social distancing, clean and disinfect workspaces for a minimum of 14 days.
- Essential workers, to the

extent possible, are required to avoid extended periods in public, contact with strangers, and large congregate settings for a period of, at least, 14 days.

Essential workers and their employers are expected to comply with previously issued DOH guidance regarding return to work after a suspected or confirmed case of COVID-19 or after the employee had close or proximate contact with a person with COVID-19.

Additionally, this guidance may be superseded by more specific industry guidance for a particular industry (e.g., for a nursing home worker, a negative test PCR test will be required before return to work). Consult with your employer regarding whether there is industry-specific guidance that may apply to you.

Please consult the DOH website and resources for additional details and information regarding isolation procedures for when a person under quarantine is diagnosed with COVID-19 or develops symptoms.

For reference, an “essential worker” is (1) any individual employed by an entity included on the Empire State Development (ESD) Essential Business list; or (2) any individual who meets the COVID-19 testing criteria, pursuant to their status as either an individual who is employed as a health care worker, first responder, or in any position within a nursing home, long-term care facility, or other congregate care setting, or an individual who is employed as an essential employee who directly interacts with the public while working, pursuant to DOH Protocol for COVID-19 Testing, issued May 31, 2020, or (3) any other worker deemed such by the Commissioner of Health.

**NEXT SECTION**

Continue ↓

## Ineligible for Paid Sick Leave Scenario

# Ineligible for Paid Sick Leave Scenario

New York employees will forgo their paid sick leave benefits from New York's COVID-19 paid sick leave law if they engage in non-essential travel to high risk states (listed above). High risk states are any state that has a positive test rate higher than 10 per 100,000 residents, or higher than a 10 percent test positivity rate over a seven-day rolling average.

This provision does not apply if the employee travels for work or at the employer's request. The provision included in Executive Order 202.45

(<https://www.governor.ny.gov/news/no-20245-continuing-temporary-suspension-and-modification-laws-relating-disaster-emergency>) mirrors the law's existing

provision that makes New Yorkers ineligible for paid sick leave if they travel to any country designated as having a level two or three travel health notice from the Centers for Disease Control and Prevention.

**NEXT SECTION**

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## Frequently Asked Questions

# Frequently Asked Questions

**Travel Advisory**  
**Frequently Asked**  
**Questions**

**(/system/files/documents/2020/07/nys-covid-travel-advisory-faq\_0.pdf)**



Frequently Asked  
Questions  
Regarding  
Quarantine  
Restrictions on  
Travelers Arriving in  
New York State  
Following Out of  
State Travel

**(/system/files/documents/2020/07/nys-covid-travel-advisory-faq\_0.pdf)**

## **Novel Coronavirus**

**STAY INFORMED**

Department of Health  
County-by-County Confirmed Cases  
County Health Departments

**BUSINESSES**

Essential Businesses  
Disease Control and Prevention  
Employers

**RESOURCES & GUIDANCE**

Healthcare Providers  
Nursing Homes  
Child Care Providers

**ABOUT**

File Formats  
Select this Web Site  
Disclaimer

Privacy Policy  
Accessibility

**LANGUAGE ASSISTANCE**

English      한국어 (Korean)  
Español (Spanish)  
中文 (Chinese)  
Русский (Russian)  
ইংরেজি (Bengali)  
Kreyòl Ayisyen (Haitian-Creole)

**CONNECT WITH US**

 **FACEBOOK**     **PINTEREST**     **TWITTER**     **YOUTUBE**

# Exhibit C



# GEORGIA

STATE REPORT | 08.09.2020

## SUMMARY

- Georgia is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%.
- Georgia has seen stability in new cases, but an increase in test positivity over the past week. There is widespread and expanding community viral spread. There is no significant improvement in the Atlanta metro area, with continued high levels of new cases at a plateau. Mitigation efforts must increase.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Fulton County, 2. Gwinnett County, and 3. Cobb County. These counties represent 25.0 percent of new cases in Georgia, but the virus is widespread. Fulton County has the highest rate of increase of new cases, despite current mitigation efforts and efforts must be heightened. To support additional testing, a Federal testing site is opening in Fulton County on 8/10 and will operate for 12 days, with a capacity of 5000 tests per day.
- Georgia had 213 new cases per 100,000 population in the past week, compared to a national average of 114 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 77 to support operations activities from FEMA; 10 to support operations activities from ASPR; 27 to support epidemiology activities from CDC; 1 to support operations activities from USCG; 3 to support medical activities from VA; and 1 to support operations activities from VA.
- Between Aug 01 - Aug 07, on average, 305 patients with confirmed COVID-19 and 356 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Georgia. An average of 81 percent of hospitals reported either new confirmed or new suspected COVID patients each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.\*

## RECOMMENDATIONS

- Expand the protection of those in nursing homes, assisted living, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19 and the isolation of all positive staff and residents. Ensure social distancing and universal facemask use. Immediately conduct infection control prevention surveys in all nursing homes with more than 3 cases in the last 3 weeks. Antigen testing supplies will continue to be provided by the Federal Government over the next 4-6 weeks to support routine testing.
- Current mitigation efforts are not having a sufficient impact and would strongly recommend a statewide mask mandate.
- In red counties, close all establishments where social distancing and mask use cannot occur, such as bars, nightclubs, and entertainment venues.
- Further limit indoor dining to under 25% occupancy and expand outdoor dining.
- Ask every citizen to limit social gatherings to 10 or fewer people.
- Increase messaging of the risk of serious disease in all age groups for individuals with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing.
- Work with local communities to implement and provide clear guidance for households that test positive, including on individual isolation and quarantining procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Monitor testing data to identify additional sites of increased transmission and focus public health resources there.
- Ensure every public health lab is fully staffed and running 24/7 and utilizing all platforms to reduce turnaround times. Institute 2:1 pooling of specimens on all high throughput machines as long as turnaround times are greater than 36 hours.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Ensure all hospital testing capacity is being fully utilized to support additional community, nursing home, and school (K-12) testing as emergency department visits and admissions decline, and additional testing capacity is available.
- Specific, detailed guidance on community mitigation measures can be found on the [CDC website](#).

*The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.*

\* Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.

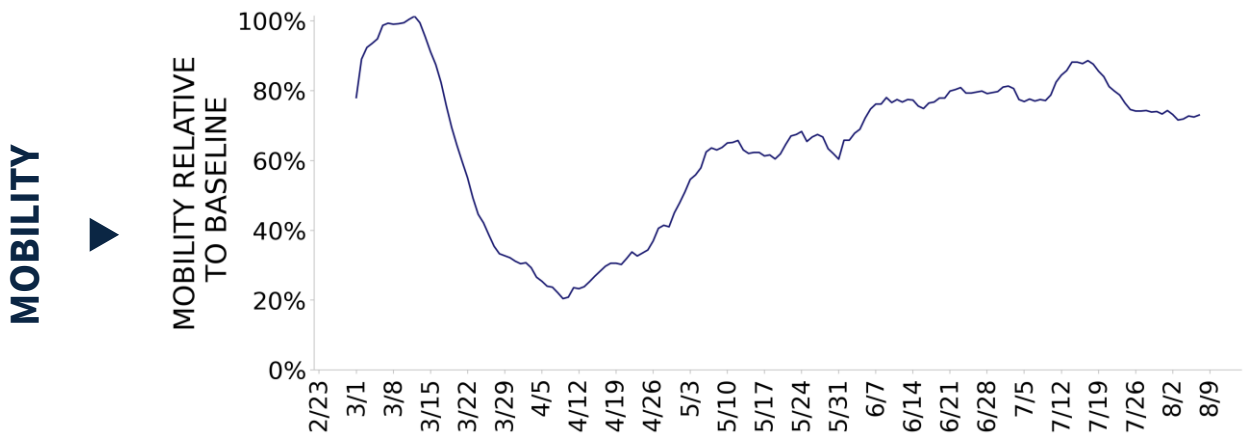




# GEORGIA

STATE REPORT | 08.09.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
<b>NEW CASES (RATE PER 100,000)</b>	22,660 (213)	-9.2%	123,846 (185)	375,035 (114)
<b>DIAGNOSTIC TEST POSITIVITY RATE</b>	13.0%	+0.6%*	12.2%	7.1%
<b>TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)</b>	74,251** (699)	-48.8%**	898,618** (1,343)	4,863,237** (1,482)
<b>COVID DEATHS (RATE PER 100,000)</b>	364 (3)	+17.4%	2,438 (4)	7,261 (2)
<b>SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE</b>	22.8%	+1.9%*	22.2%	12.1%



\* Indicates absolute change in percentage points.

\*\* Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

### DATA SOURCES

**Note:** Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

**Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 8/7/2020; last week is 8/1 - 8/7, previous week is 7/25 - 7/31.

**Testing:** State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 8/5/2020. Last week is 7/30 - 8/5, previous week is 7/23 - 7/29. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/08/2020.

**Mobility:** Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 8/7/2020.

**SNFs:** Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/27-8/2, previous week is 7/20-7/26.



# GEORGIA

STATE REPORT | 08.09.2020

## COVID-19 COUNTY AND METRO ALERTS\*

### LOCALITIES IN RED ZONE

### LOCALITIES IN YELLOW ZONE

**METRO AREA (CBSA) LAST WEEK**

**34**

Top 12 shown (full list below)

Atlanta-Sandy Springs-Alpharetta  
Augusta-Richmond County  
Savannah  
Columbus  
Macon-Bibb County  
Gainesville  
Dalton  
Athens-Clarke County  
Valdosta  
Brunswick  
Albany  
Rome

**4**

Warner Robins  
Chattanooga  
Waycross  
Eufaula

**COUNTY LAST WEEK**

**109**

Top 12 shown (full list below)

Chatham  
Richmond  
Hall  
Clayton  
Muscogee  
Bibb  
Whitfield  
Henry  
Lowndes  
Columbia  
Forsyth  
Clarke

**30**

Top 12 shown (full list below)

Fulton  
Gwinnett  
Cobb  
DeKalb  
Cherokee  
Douglas  
Houston  
Rockdale  
Ware  
Gilmer  
Murray  
Pickens

**All Red CBSAs:** Atlanta-Sandy Springs-Alpharetta, Augusta-Richmond County, Savannah, Columbus, Macon-Bibb County, Gainesville, Dalton, Athens-Clarke County, Valdosta, Brunswick, Albany, Rome, Dublin, Douglas, Calhoun, Jesup, Jefferson, Statesboro, Vidalia, LaGrange, Thomasville, Bainbridge, Hinesville, St. Marys, Milledgeville, Cedartown, Cornelia, Tifton, Toccoa, Moultrie, Summerville, Fitzgerald, Americus, Thomaston

**All Red Counties:** Chatham, Richmond, Hall, Clayton, Muscogee, Bibb, Whitfield, Henry, Lowndes, Columbia, Forsyth, Clarke, Glynn, Bartow, Paulding, Newton, Floyd, Carroll, Barrow, Coweta, Gordon, Wayne, Fayette, Walton, Jackson, Bulloch, Coffee, Laurens, Dougherty, Troup, Thomas, Decatur, Camden, Polk, Liberty, Toombs, Effingham, Bryan, Baldwin, Habersham, Spalding, Tattnell, Chattahoochee, Charlton, Washington, Jeff Davis, Emanuel, Appling, Tift, Stephens, Jefferson, Burke, Colquitt, Grady, Peach, Madison, Dawson, Evans, Oconee, Monroe, Hart, Putnam, Morgan, Chattooga, McDuffie, Cook, White, Greene, Jones, Brooks, Ben Hill, Elbert, Seminole, Lamar, Franklin, Upson, Sumter, Johnson, Atkinson, Berrien, Banks, Oglethorpe, Montgomery, Bleckley, Wilkinson, Brantley, Telfair, Worth, Hancock, Clinch, Twiggs, Treutlen, Jenkins, Screven, Towns, Lincoln, Heard, Randolph, Dodge, Marion, Turner, Early, Pulaski, Talbot, Wilcox, Warren, Calhoun, Stewart, Clay

**All Yellow Counties:** Fulton, Gwinnett, Cobb, DeKalb, Cherokee, Douglas, Houston, Rockdale, Ware, Gilmer, Murray, Pickens, Harris, Fannin, Lumpkin, Mitchell, Butts, Candler, Rabun, Meriwether, Pierce, Lee, Haralson, McIntosh, Miller, Pike, Jasper, Wilkes, Schley, Taylor

\* Localities with fewer than 10 cases last week have been excluded from these alerts.

**Red Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

**Yellow Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

**Note:** Top 12 locations are selected based on the highest number of new cases in the last three weeks.

#### DATA SOURCES

**Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 8/7/2020; last week is 8/1 - 8/7, three weeks is 7/18 - 8/7.

**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 8/5/2020. Last week is 7/30 - 8/5. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

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## POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

### Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

### Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

### Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling:** Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling:** For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

## POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

### Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

### Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

### Testing

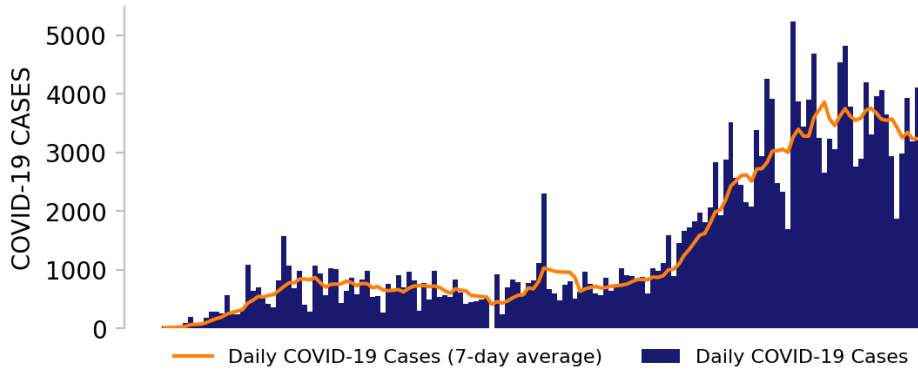
- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling:** Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling:** For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device



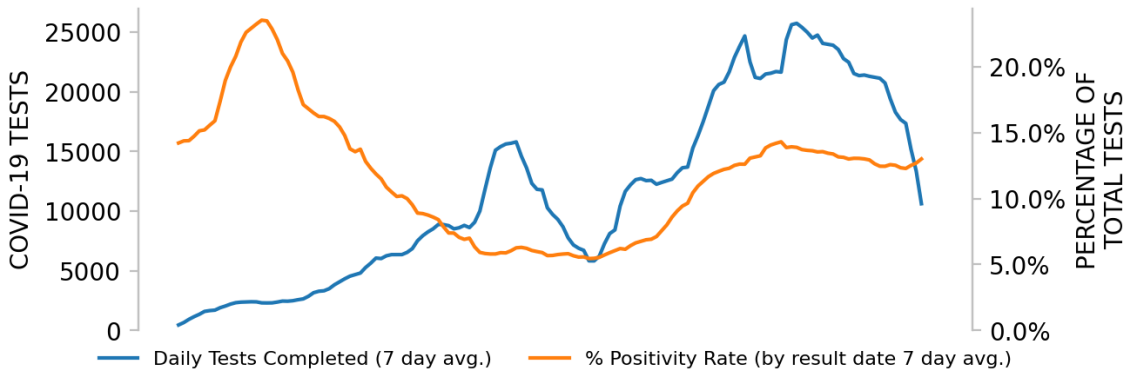
# GEORGIA

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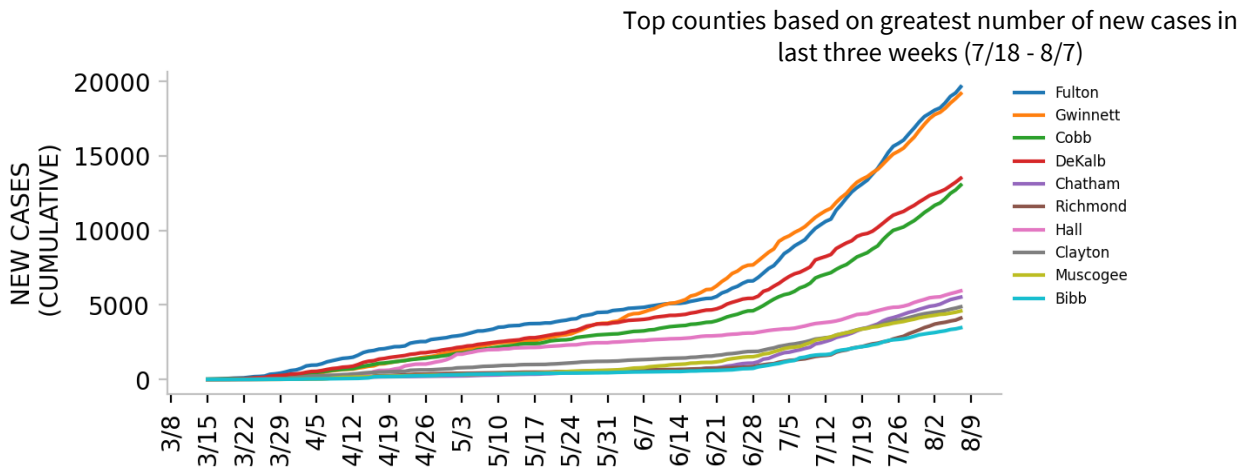
## NEW CASES



## TESTING



## TOP COUNTIES



### DATA SOURCES

**Cases:** County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 8/7/2020.

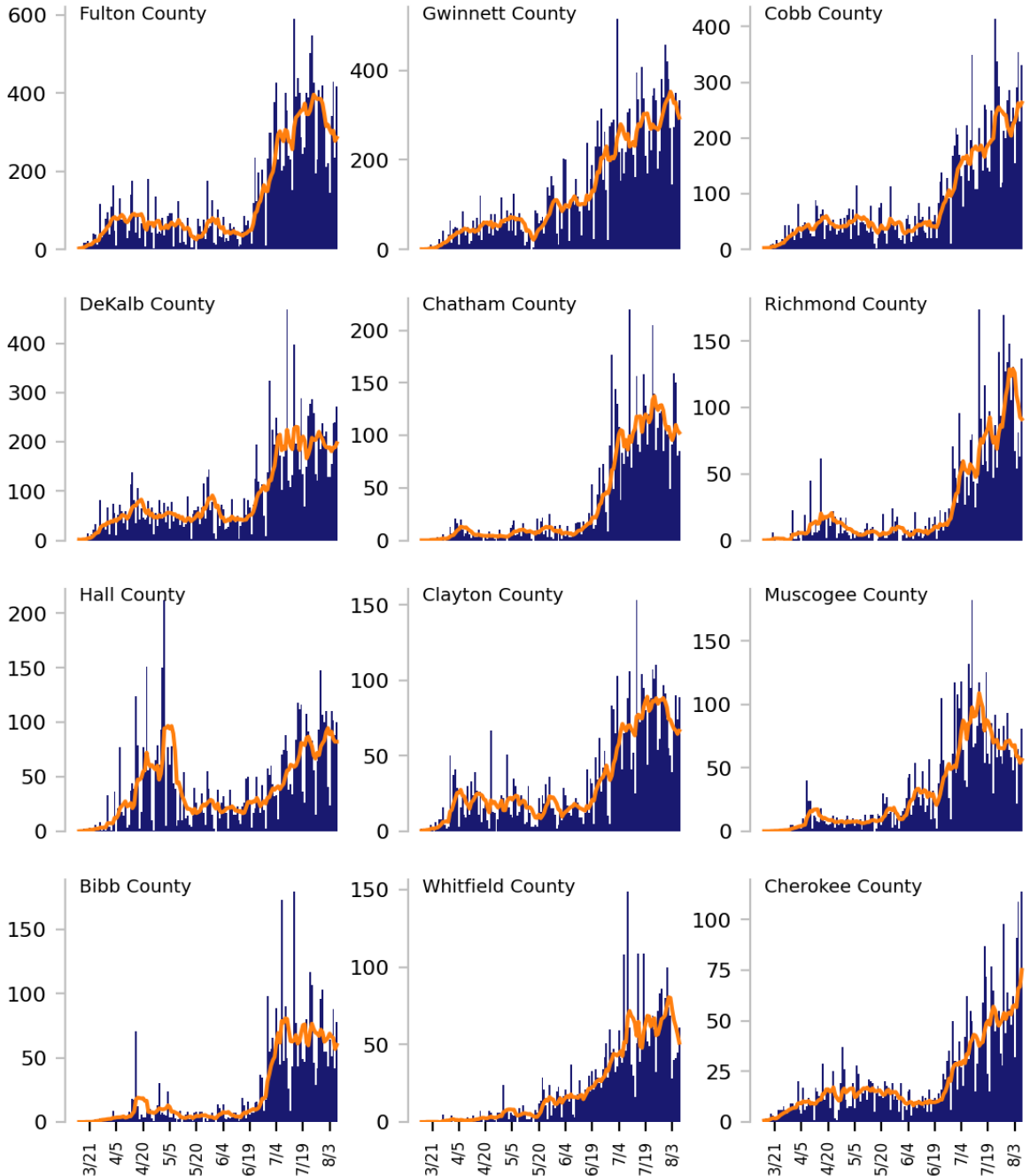
**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 8/5/2020.



# Top 12 counties based on number of new cases in the last 3 weeks

— Daily COVID-19 Cases (7-day average)    ■ Daily COVID-19 Cases

TOTAL DAILY CASES



## DATA SOURCES

Cases: County-level data from USAFacts through 8/7/2020. Last 3 weeks is 7/18 - 8/7.

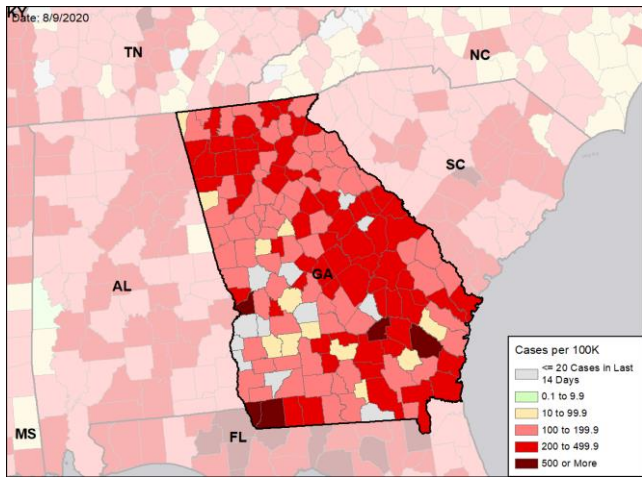


# GEORGIA

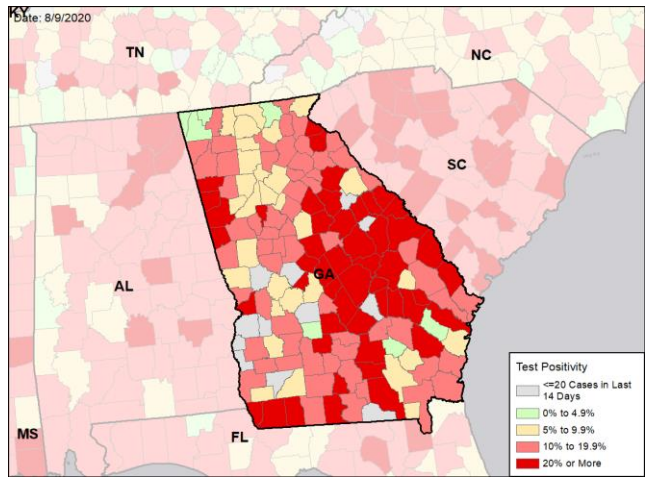
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## CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

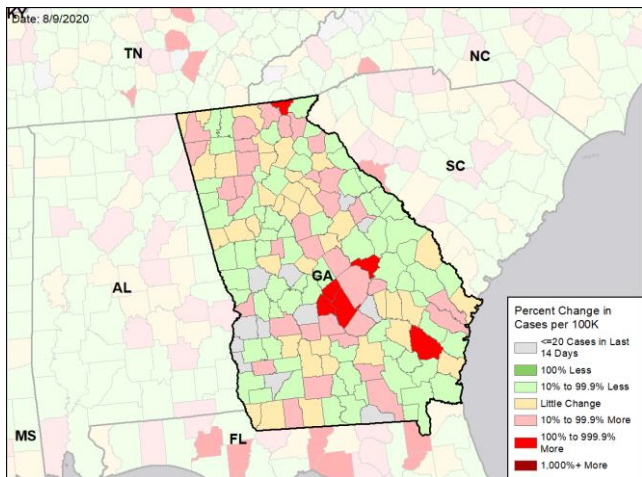
### NEW CASES PER 100,000 DURING LAST WEEK



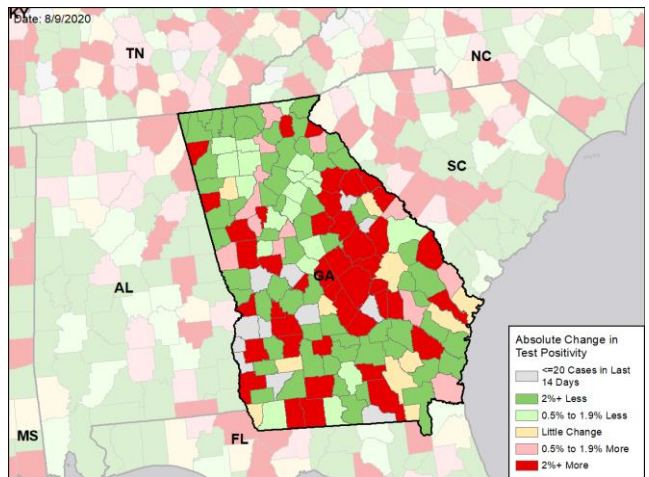
### TEST POSITIVITY DURING LAST WEEK



### WEEKLY % CHANGE IN NEW CASES PER 100K



### WEEKLY CHANGE IN TEST POSITIVITY



### DATA SOURCES

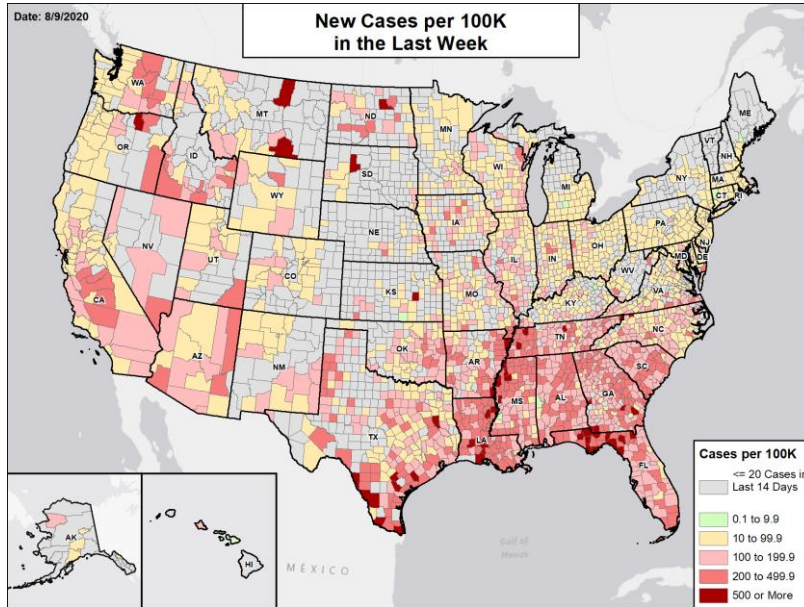
**Cases:** County-level data from USAFacts through 8/7/2020. Last week is 8/1 - 8/7, previous week is 7/25 - 7/31.

**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 8/5/2020. Last week is 7/30 - 8/5, previous week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

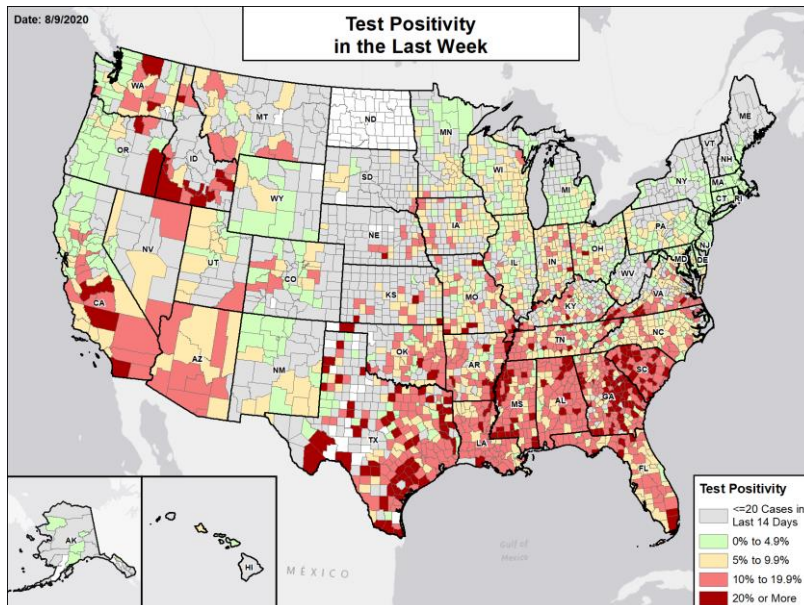


# National Picture

## NEW CASES PER 100,000 LAST WEEK



## TEST POSITIVITY LAST WEEK



### DATA SOURCES

**Cases:** County-level data from USAFacts through 8/7/2020. Last week is 8/1 - 8/7.

**Testing:** Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 8/5/2020. Last week is 7/30 - 8/5. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.



# Methods

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**COLOR THRESHOLDS:** Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

## DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 15:15 EDT on 08/09/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 8/1 to 8/7; previous week data are from 7/25 to 7/31.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/30 to 8/5; previous week data are from 7/23 to 7/29. HHS Protect data is recent as of 14:00 EDT on 08/09/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/08/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/09/2020 and through 8/7/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 17:15 EDT on 08/09/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

# Exhibit D



# ALABAMA

STATE REPORT | 07.14.2020

## SUMMARY

- Alabama is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%.
- Disease trends are moving in the wrong direction with cases continuing to increase and record numbers of new cases occurring in urban, suburban and rural areas. Hospitalizations increased sharply in the past week. The test positivity rate remains very elevated.
- The vast majority of counties had a positivity rate above 10% in the last week; more testing is needed. Montgomery, which instituted a masking requirement in mid-June, has seen a flattening of daily cases.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Jefferson County, 2. Mobile County, and 3. Madison County. These counties represent 30.3 percent of new cases in Alabama.
- Alabama had 177 new cases per 100,000 population in the past week, compared to a national average of 119 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 38 to support leadership, administrative, operations, and logistics activities from HHS and FEMA; and 1 to support medical activities from VA.

## RECOMMENDATIONS

- Mandate wearing of cloth face coverings outside the home statewide.
- Ensure that all business retailers and personal services require masks and can safely social distance.
- Current capacity limits of 50% in gyms and restaurants as contained in the state order should be intensified. In all counties with 7-day average test positivity greater than 10%, close bars and gyms, and create outdoor dining opportunities with pedestrian areas.
- Protect those in nursing homes and long-term care facilities by testing all staff each week and requiring staff to wear cloth face coverings. Limitation of visitors as contained in the state order is essential.
- Move to community-led testing and work with local community groups to increase testing access. In high transmission settings, consider pooling specimens to test 2-3 persons at once to increase testing access and reduce turnaround times. For families and cohabiting households, screen entire households in a single test by pooling specimens.
- Specific, detailed guidance on community mitigation measures can be found on the [CDC website](#).

*The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.*





# ALABAMA

STATE REPORT | 07.14.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
<b>NEW CASES (RATE PER 100,000)</b>	<b>8,644 (177)</b>	<b>+12.5%</b>	<b>135,129 (204)</b>	<b>389,358 (119)</b>
<b>DIAGNOSTIC TEST POSITIVITY RATE</b>	<b>17.3%</b>	<b>+0.2%*</b>	<b>15.7%</b>	<b>9.6%</b>
<b>TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)</b>	<b>71,864 (1,470)</b>	<b>+16.0%</b>	<b>738,971 (1,113)</b>	<b>3,833,229 (1,172)</b>
<b>COVID DEATHS (RATE PER 100,000)</b>	<b>98 (2)</b>	<b>-2.0%</b>	<b>1,114 (2)</b>	<b>4,616 (1)</b>

## MOBILITY



\* Indicates absolute change in percentage points

### DATA SOURCES

**Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/10/2020; last week is 7/4 - 7/10, previous week is 6/27 - 7/3.

**Testing:** State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/8/2020. Last week is 7/2 - 7/8, previous week is 6/25 - 7/1.

**Mobility:** Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/11/2020.



# ALABAMA

STATE REPORT | 07.14.2020

## LOCALITIES IN RED ZONE

## LOCALITIES IN YELLOW ZONE

**METRO AREA (CBSA) LAST WEEK**

<b>23</b> Top 12 shown	Birmingham-Hoover Montgomery Mobile Huntsville Tuscaloosa Albertville Daphne-Fairhope-Foley Auburn-Opelika Decatur Gadsden Fort Payne Florence-Muscle Shoals	<b>4</b>	Dothan Talladega-Sylacauga Alexander City Enterprise
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**COUNTY LAST WEEK**

<b>51</b> Top 12 shown	Jefferson Mobile Madison Montgomery Tuscaloosa Marshall Shelby Baldwin Lee Etowah Morgan DeKalb	<b>14</b> Top 12 shown	Lauderdale Houston Talladega Perry Coffee Bullock Lawrence Geneva Henry Lamar Choctaw Fayette
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**Red Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

**Yellow Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

**Note:** Top 12 locations are selected based on the highest number of new cases in the last three weeks.

### DATA SOURCES

**Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/10/2020; last week is 7/4 - 7/10, three weeks is 6/20 - 7/10.

**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/8/2020. Last week is 7/2 - 7/8.

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## POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

### Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

### Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

### Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling:** laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling:** For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

## POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

### Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

### Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
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### Testing

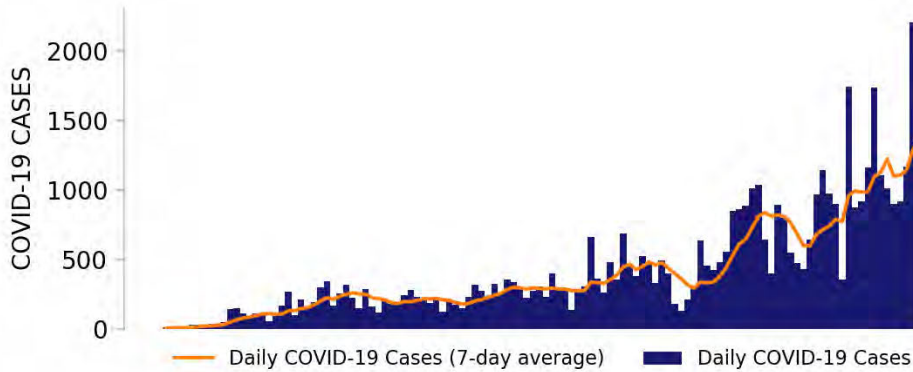
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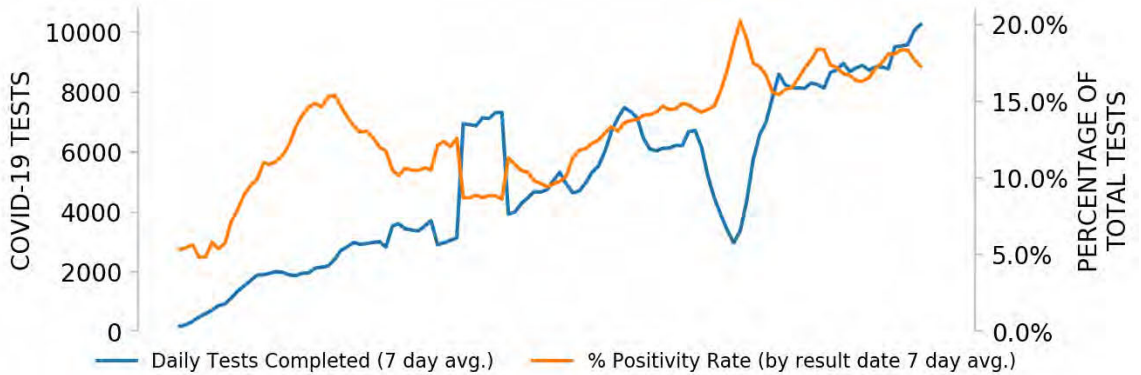
# ALABAMA

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## NEW CASES

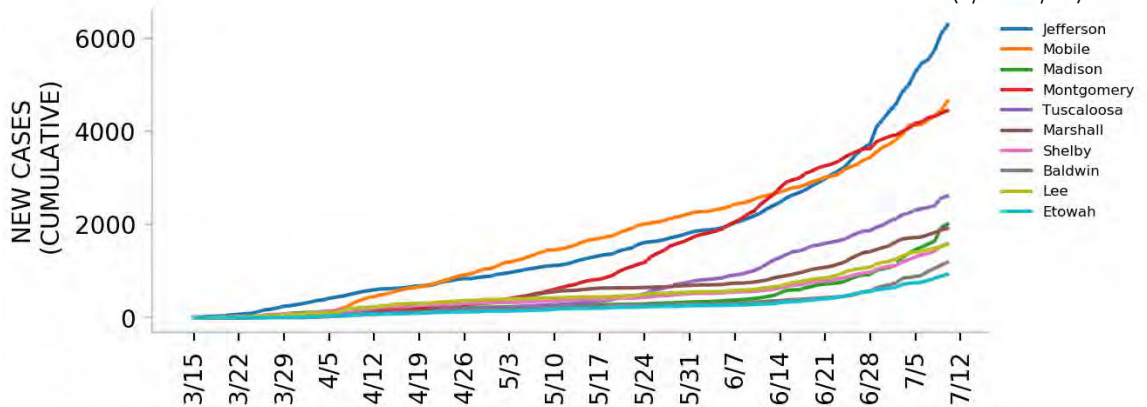


## TESTING



Top counties based on greatest number of new cases in last three weeks (6/20 - 7/10)

## TOP COUNTIES



### DATA SOURCES

**Cases:** County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/10/2020.

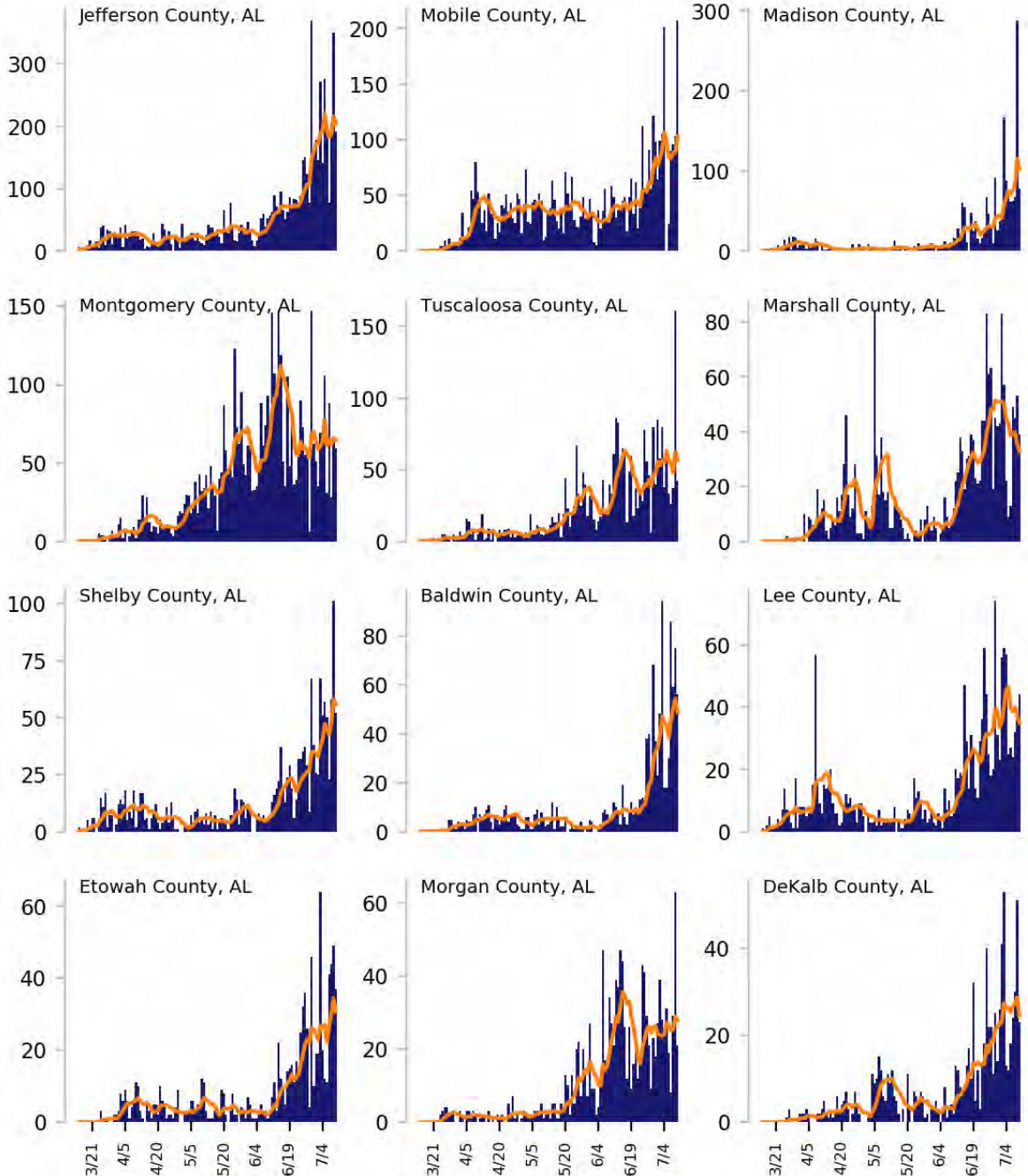
**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/8/2020.



# Top 12 counties based on number of new cases in the last 3 weeks

— Daily COVID-19 Cases (7-day average)    ■ Daily COVID-19 Cases

TOTAL DAILY CASES



## DATA SOURCES

Cases: County-level data from USAFacts through 7/10/2020. Last 3 weeks is 6/20 - 7/10.

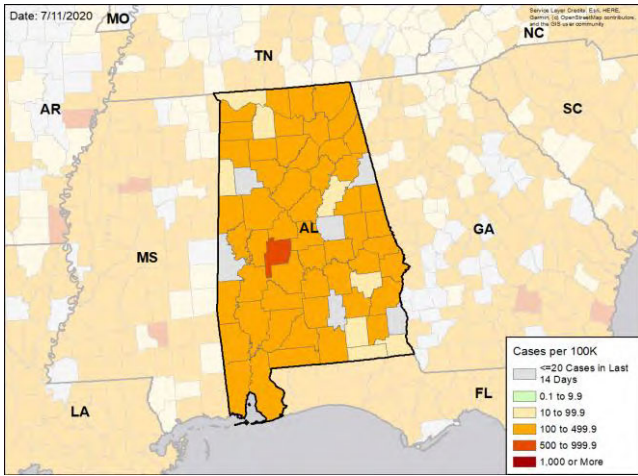


# ALABAMA

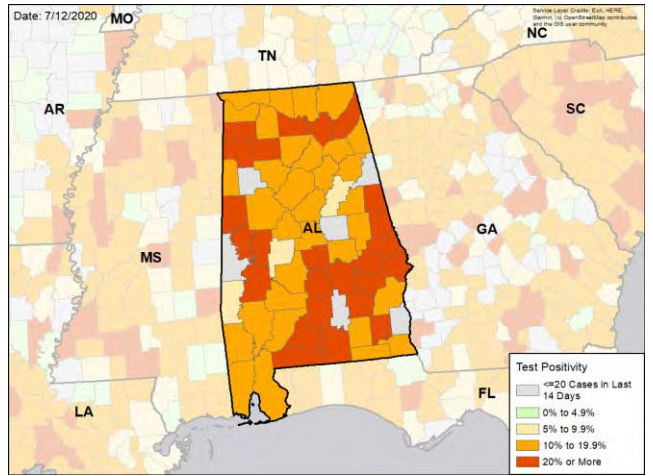
STATE REPORT | 07.14.2020

## CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

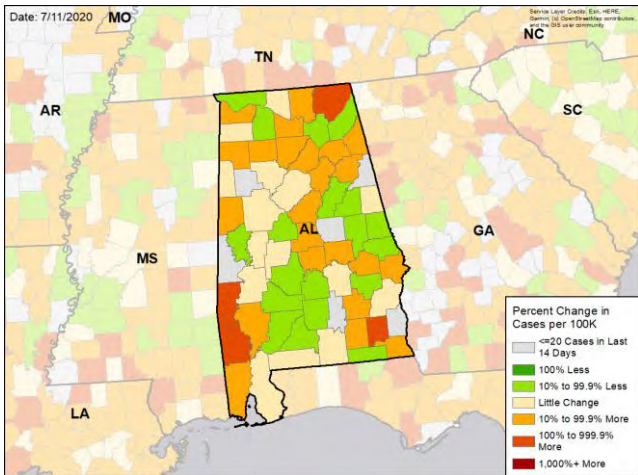
### NEW CASES PER 100,000 DURING LAST WEEK



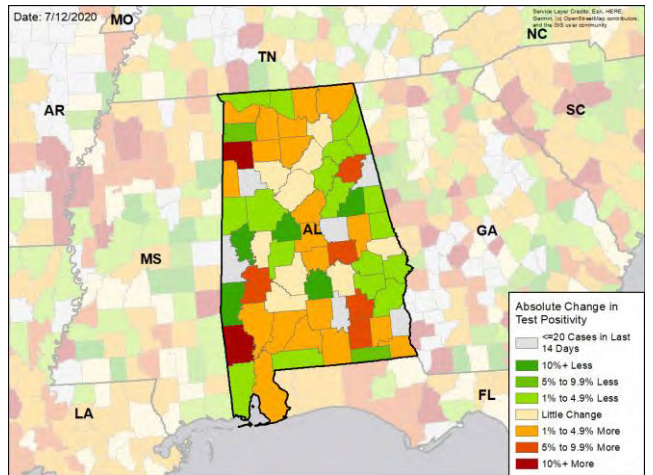
### TEST POSITIVITY DURING LAST WEEK



### WEEKLY % CHANGE IN NEW CASES PER 100K



### WEEKLY CHANGE IN TEST POSITIVITY



### DATA SOURCES

**Cases:** County-level data from USAFacts through 7/10/2020. Last week is 7/4 - 7/10, previous week is 6/27 - 7/3

**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/8/2020. Last week is 7/2 - 7/8, previous week is 6/25 - 7/1.

# **Exhibit E**

Set  
Weather



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# Alabama adds 722 new coronavirus cases as 7-day average drops to lowest since late June

Updated Aug 16, 2020; Posted Aug 16, 2020



Raleigh Parrish of Pinson wears her mask while picking up food at a food giveaway at the NE YMCA. Wearing masks in the rain in downtown Birmingham. Alabamians cope with the COVID-19 pandemic. (Joe Songer | jsonger@al.com). Joe Songer | jsonger@al.com

102  
shares

By **Leada Gore** | [lgore@al.com](mailto:lgore@al.com)

Alabama added more than 700 new coronavirus cases since yesterday.

The Alabama Department of Public Health's Aug. 16 10 a.m. numbers show 104,079 COVID-19 cases, an addition of 722 since yesterday. The state added 2 more deaths, bringing the total to 1,830.

The number of new cases to the cumulative count brings the 7-day average down to 906, the lowest it has been since late June, according to tracking site [BamaTracker.com](https://www.al.com/news/2020/08/alabama-adds-722-new-coronavirus-cases-as-7-day-average-drops-to-lowest-since-late-june.html).

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**Bama Tracker: Alabama COVID-19**  
@BamaTracker

Alabama added 722 cases to the cumulative count today bringing the 7-day average down to 906, the lowest it has been since late June.

11:43 AM · Aug 16, 2020

158 43 people are Tweeting about this

Alabama has tested 842,070 people for coronavirus, 187,489 in the last two weeks. Of those recent tests, 14,448 have been positive. The state has listed 41,523 presumed recoveries from the virus with 1,259 people currently hospitalized.

Here are the latest county-by-county case numbers. The figures in parenthesis are the increase from the previous day:

Advertisement

Autauga – 1,218 (+6)

Baldwin- 3,877 (+38)

Barbour – 604 (+6)

Bibb – 469

Blount – 860 (+6)

Bullock – 496 (+1)

Butler – 792 (+4)

Calhoun – 1,919 (+16)

Chambers – 854

Cherokee – 302 (+3)

Chilton – 859 (+2)

Choctaw – 293 (+1)

Clarke – 833

Clay – 301 (+5)

Advertisement

Cleburne – 133 (+1)

Coffee – 812 (+7)

Colbert – 1,272 (+7)

Conecuh – 403 (+1)

Coosa – 106

Covington – 773 (+2)

Crenshaw – 349 (+2)

Cullman – 1,274 (+16)

Dale – 879 (+8)

Dallas – 1,363

DeKalb – 1,896 (+3)

Elmore – 1,826 (+26)

Escambia – 1,113 (+5)

Advertisement

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Etowah – 2,263 (+35)

Fayette – 241 (+4)

Franklin – 1,351 (+26)

Geneva – 283 (+5)

Greene – 258 (+1)

Hale – 495

Henry – 275 (+1)

Houston – 1,519 (+9)

Jackson – 1,124 (+4)

Jefferson – 13,988 (+83)

Lamar – 240 (+1)

Lauderdale – 1,238 (+7)

Advertisement

Lawrence - 370 (+3)

Lee – 2,776 (+16)

Limestone – 1,449 (+17)

Lowndes – 578 (+1)

Macon – 346 (+1)

Madison – 5,687 (+26)

Marengo – 585 (+2)

Marion – 606 (+6)

Marshall – 3,233 (+6)

Mobile – 11,022 (+61)

Monroe – 432

Montgomery – 7152 (+83)

Morgan – 2,502 (+14)

Perry – 456 (+1)

Pickens – 436 (+2)

Pike – 723 (+1)

Randolph – 409

Russell – 1,407 (+2)

St. Clair – 1,412 (+17)

Advertisement

Shelby – 3,495 (+29)

Sumter – 374 (+1)

Talladega – 1,133 (+11)

Tallapoosa – 887

Tuscaloosa – 4,449 (+38)

Walker – 1,618 (+19)

Washington – 465 (+1)

Wilcox – 449 (+1)

Winston – 477 (+13)

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## **Alabama woman charged with sister's murder after decomposing corpse**

## **Alabama woman charged with sister's murder after decomposing corpse found in mobile home**

Alabama

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Alabama

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Alabama

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## US Obesity Doctor Reveals the No.1 Worst Carb You're Buying Every Week

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## The Real Cost of a Financial Advisor

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## Coronavirus update: Fauci ‘not pleased’; Chicken wings test positive for coronavirus

Alabama

## Alabama ‘witch doctor’ arrested in Leila Cavett disappearance, report states

Alabama

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## 3 dead in north Alabama shooting

Alabama

## 8-year-old boy dies nearly 1 month after he was crushed by angel yard statue

Alabama

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# Exhibit F



# TEXAS

STATE REPORT | 07.14.2020

## SUMMARY

- Texas is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%.
- Texas has seen an increase in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Harris County, 2. Dallas County, and 3. Bexar County. These counties represent 35.0 percent of new cases in Texas.
- Multiple counties and metros across Texas have significant community spread.
- Texas had 206 new cases per 100,000 population in the past week, compared to a national average of 119 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 155 to support leadership, administrative, operations, and logistics activities from HHS, CDC, USCG, VA, and FEMA; 76 to support medical activities from HHS and VA; and 9 to support epidemiology activities from CDC.
- The federal government has supported a surge testing site in MacAllen/Weslaco, TX.

## RECOMMENDATIONS

- Continue routine weekly testing of all workers in assisted living and long-term care facilities and require masks and social distancing for all visitors.
- Mandate masks in all counties with rising test percent positivity; multiple counties and metros are now in this category.
- Close all bars in all counties with rising test percent positivity, increase outdoor dining opportunities, decrease indoor dining to 25%, and limit social gatherings to 10 or fewer people.
- Continue the scale-up of testing, moving to community-led neighborhood testing and working with local community groups to increase household testing of multigenerational households with clear guidance on test positive isolation procedures and mask use.
- Ensure all individuals and households engaged in any multi-household social activities are rapidly tested, either in pools or as individuals.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension and diabetes mellitus.
- Expand testing capacity in Public Health labs, adding shifts and weekend shifts to decrease turnaround times. Institute 2:1 pooling of test specimens.
- Expand pooled collection into neighborhoods with household pools, allowing rapid household alerts and household isolation with follow-up individual diagnostic tests. This approach will allow rapid screening of entire neighborhoods and isolation of cases to dramatically decrease spread.
- Specific, detailed guidance on community mitigation measures can be found on the [CDC website](#).

*The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.*



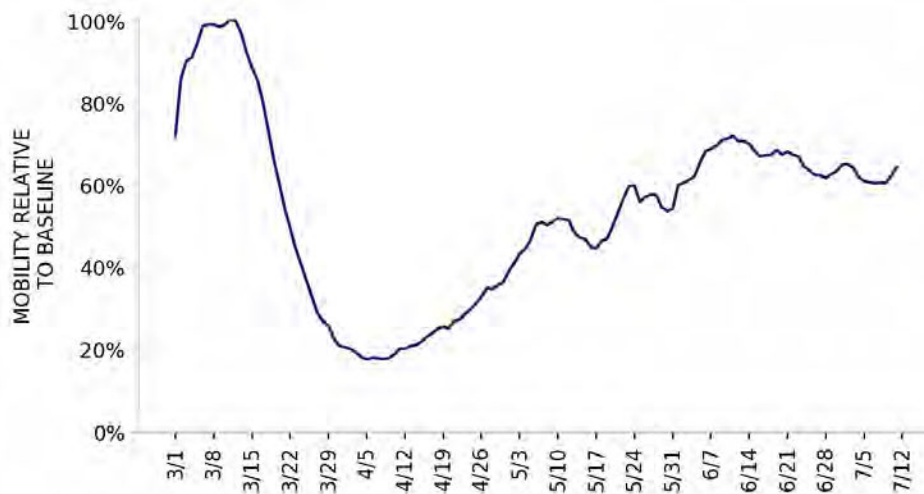


# TEXAS

STATE REPORT | 07.14.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
<b>NEW CASES (RATE PER 100,000)</b>	<b>59,138 (206)</b>	<b>+29.0%</b>	<b>80,470 (190)</b>	<b>389,358 (119)</b>
<b>DIAGNOSTIC TEST POSITIVITY RATE</b>	<b>20.6%</b>	<b>+0.9%*</b>	<b>16.5%</b>	<b>9.6%</b>
<b>TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)</b>	<b>313,056 (1,091)</b>	<b>-6.4%</b>	<b>507,967 (1,198)</b>	<b>3,833,229 (1,172)</b>
<b>COVID DEATHS (RATE PER 100,000)</b>	<b>497 (2)</b>	<b>+95.7%</b>	<b>679 (2)</b>	<b>4,616 (1)</b>

## MOBILITY



\* Indicates absolute change in percentage points

### DATA SOURCES

**Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/10/2020; last week is 7/4 - 7/10, previous week is 6/27 - 7/3.

**Testing:** State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/8/2020. Last week is 7/2 - 7/8, previous week is 6/25 - 7/1.

**Mobility:** Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/11/2020.



# TEXAS

STATE REPORT | 07.14.2020

## LOCALITIES IN RED ZONE

## LOCALITIES IN YELLOW ZONE

**METRO AREA (CBSA) LAST WEEK**

**51**  
Top 12 shown

- Houston-The Woodlands-Sugar Land
- Dallas-Fort Worth-Arlington
- Austin-Round Rock-Georgetown
- San Antonio-New Braunfels
- McAllen-Edinburg-Mission
- Corpus Christi
- El Paso
- Beaumont-Port Arthur
- Lubbock
- Waco
- Brownsville-Harlingen
- College Station-Bryan

**17**  
Top 12 shown

- Amarillo
- Wichita Falls
- Sherman-Denison
- Athens
- Granbury
- Kerrville
- Bonham
- Gainesville
- Fredericksburg
- Rockport
- Mineral Wells
- Big Spring

**COUNTY LAST WEEK**

**123**  
Top 12 shown

- Harris
- Dallas
- Bexar
- Travis
- Tarrant
- Hidalgo
- Nueces
- El Paso
- Galveston
- Williamson
- Lubbock
- McLennan

**82**  
Top 12 shown

- Collin
- Fort Bend
- Denton
- Montgomery
- Randall
- Potter
- Grayson
- Rockwall
- Henderson
- Hood
- Brewster
- Gonzales

**Red Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

**Yellow Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the “Red Zone.”

**Note:** Top 12 locations are selected based on the highest number of new cases in the last three weeks.

### DATA SOURCES

**Cases and Deaths:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/10/2020; last week is 7/4 - 7/10, three weeks is 6/20 - 7/10.

**Testing:** HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/8/2020. Last week is 7/2 - 7/8.

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## POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

### Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

### Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

### Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling:** laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling:** For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

## POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

### Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

### Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

### Testing

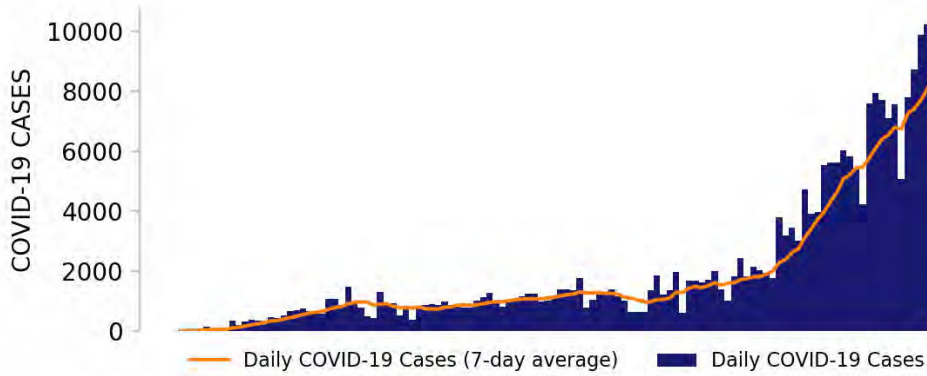
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- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling:** laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling:** For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device



# TEXAS

STATE REPORT | 07.14.2020

## NEW CASES

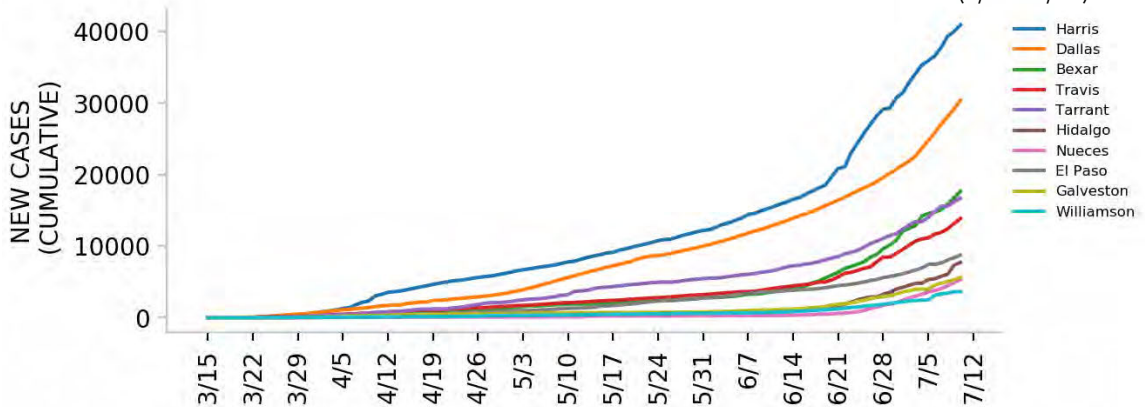


## TESTING



Top counties based on greatest number of new cases in last three weeks (6/20 - 7/10)

## TOP COUNTIES



### DATA SOURCES

**Cases:** County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/10/2020.

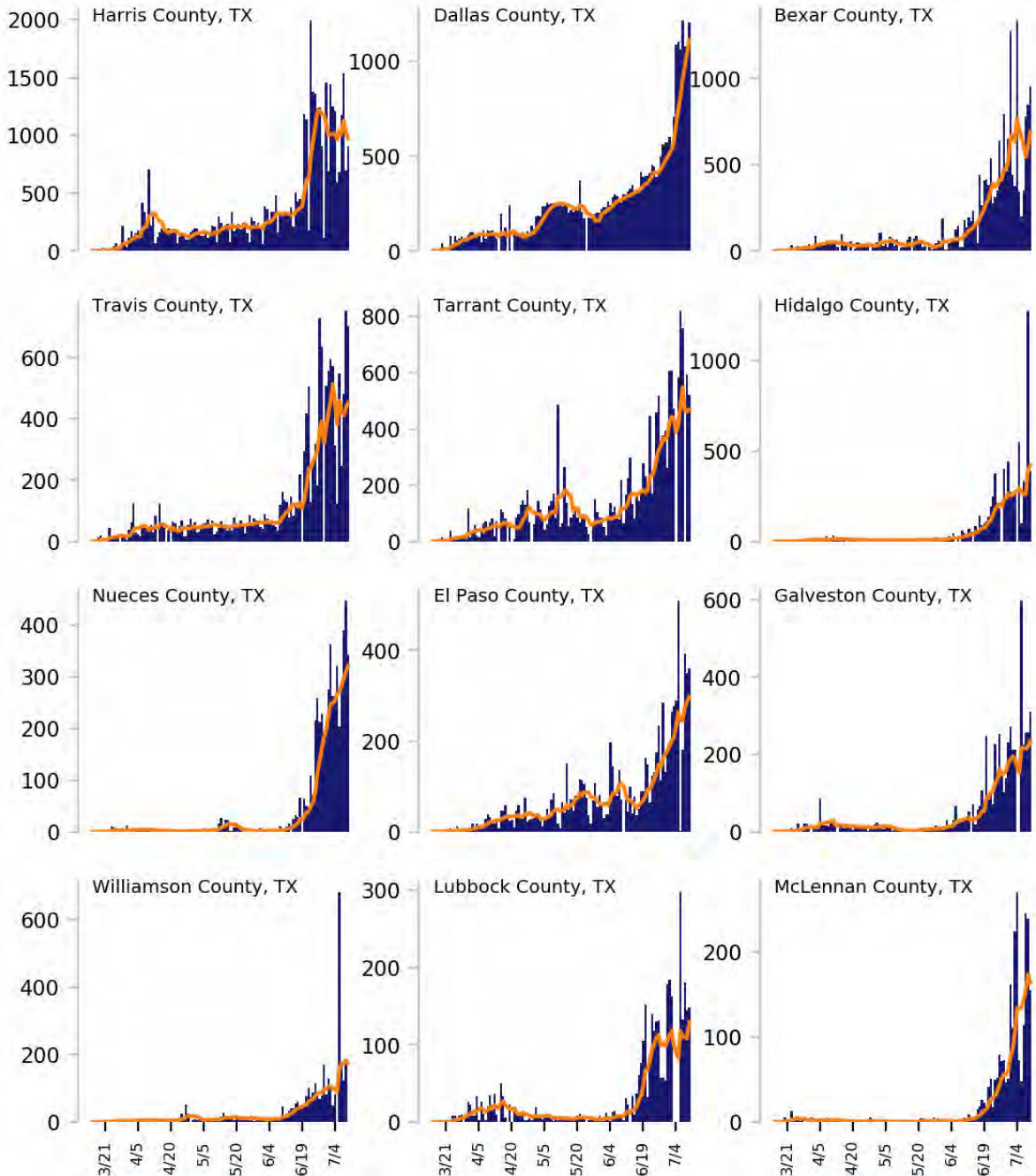
**Testing:** HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/8/2020.



# Top 12 counties based on number of new cases in the last 3 weeks

— Daily COVID-19 Cases (7-day average)    ■ Daily COVID-19 Cases

TOTAL DAILY CASES



## DATA SOURCES

Cases: County-level data from USAFacts through 7/10/2020. Last 3 weeks is 6/20 - 7/10.

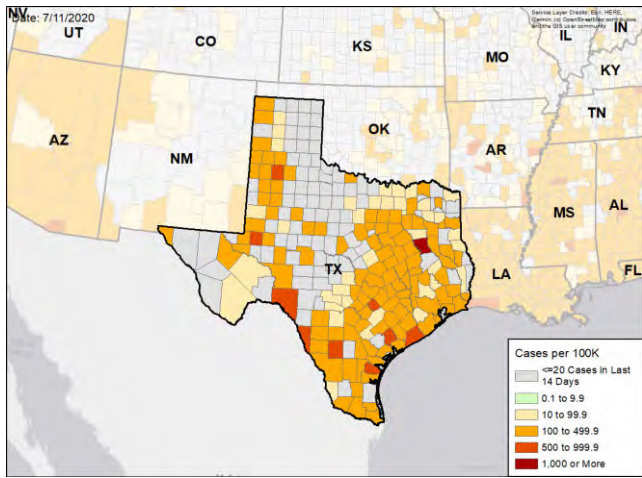


# TEXAS

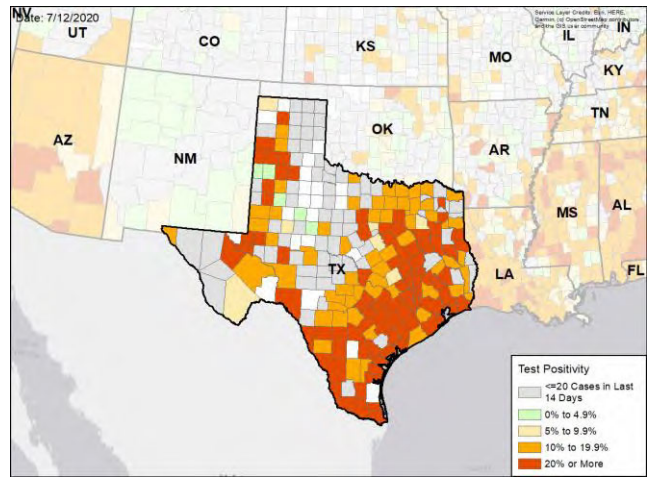
STATE REPORT | 07.14.2020

## CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

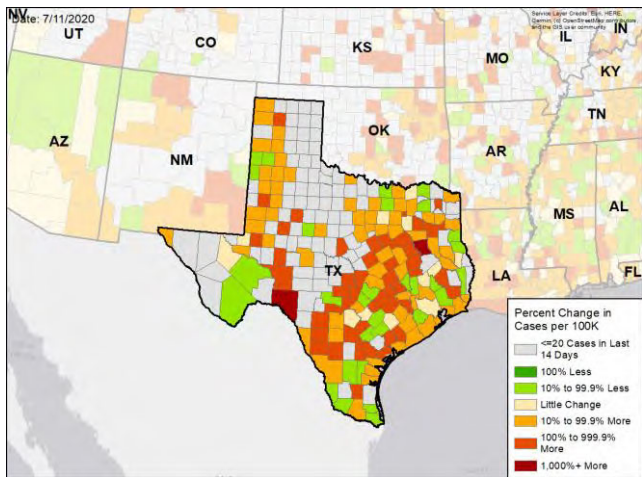
### NEW CASES PER 100,000 DURING LAST WEEK



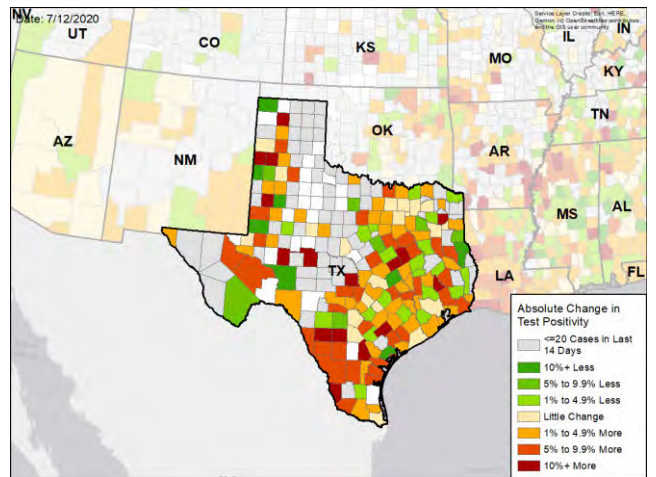
### TEST POSITIVITY DURING LAST WEEK



### WEEKLY % CHANGE IN NEW CASES PER 100K



### WEEKLY CHANGE IN TEST POSITIVITY



### DATA SOURCES

**Cases:** County-level data from USAFacts through 7/10/2020. Last week is 7/4 - 7/10, previous week is 6/27 - 7/3

**Testing:** HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/8/2020. Last week is 7/2 - 7/8, previous week is 6/25 - 7/1.